

**RECEIVED  
CENTRAL FAX CENTER****APR 11 2005****PATENT****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Anat GREENBERG, et al.

Application No.: 09/730,381

Group No.: 2623

Filed: December 5, 2000

Examiner: Bali, Vikram

For: METHOD FOR PRINTED CIRCUIT BOARD INSPECTION

Attorney Docket No.: U 013094-4

**Commissioner of Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450****CERTIFICATE OF MAILING UNDER 37 C.F.R. 1.8(a)**

I hereby certify that the attached correspondence comprising:

**AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY**

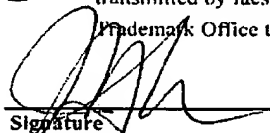
is being:

**MAILING**

- ☐ deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450

Date: April 11, 2005**FACSIMILE**

- ☒ transmitted by facsimile to the Patent and Trademark Office to (703) 872-9306

  
SignatureJULIAN H. COHEN

(type or print name of person certifying)

(Certificate of Mailing under 37 C.F.R. 1.8(a) 8-5)

**AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY**

In re Application of: Anat GREENBERG, et al.

**RECEIVED  
CENTRAL FAX CENTER**

Application No. 09/730,381

**APR 11 2005**

Filed: December 5, 2000

Title: METHOD FOR PRINTED CIRCUIT BOARD INSPECTION

Attorney Docket No. U013094-4

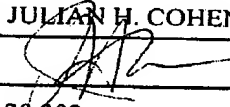
Art Unit: 2623

The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34.

Name	Registration Number
MICHAEL FAIBISCH	48,427

**This is not a Power of Attorney to the above-named practitioner.** Accordingly, the practitioner named above does **not** have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.

**SIGNATURE of Practitioner of Record**

Name	JULIAN H. COHEN		
Signature			Date April 11, 2005
Registration Number	20,302	Telephone	(212) 708-1887

This form offers a sample or suggested format for an authorization of a practitioner who is not of record. See MPEP § 713.05 for more information. This sample form is not an OMB officially approved form.

(Authorization to Act in a Representative Capacity—page 1 of 1) 12-7